PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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UTILITY PATENT APPLICATION

| | Attorney Docket No. | | H6808.0044/P044 | | | | | | |
|--|---------------------|---------------------------------|---|--|--|--|--|--|--|
| | First II | nventor | Kazuaki Tobari | | | | | | |
| | Title | CONTROL M PERMANEN' MOTOR | ETHOD AND CONTROL DEVICE OF -MAGNET TYPE SYNCHRONOUS | | | | | | |
| | Evnm | old lade I lieM a | | | | | | | |

| TRANSMITTAL Title PERMANENT-MAGNET TYPE SYNCHRO | | | | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|--|
| (Only for new nonprovisional applications under 37 CFR 1.53(b)) | MOTOR | | | | | | | | | |
| Express Mail Label No. | | | | | | | | | | |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application con | MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | | | | | |
| Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. X Specification [Total Pages 30] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Description of the Drawings (if filed) - Detailed Description |)]1 | ADDRESS TO: P.O. Box 1450 Alexandria, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) | | | | | | | | |
| - Claim(s) - Abstract of the Disclosure 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 1 | 1 1 | 10. 37 CFR 3.73(b) Statement Power of Attorney 11. English Translation Document (if applicable) | | | | | | | | |
| 5. Oath or Declaration [Total Sheets] | <u>·</u> | 12. Information Disclosure Copies of IDS | | | | | | | | |
| a. Newly executed (original or copy) | | Statement (IDS)/PTO-1449 | | | | | | | | |
| b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) | 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) | | | | | | | | | |
| Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | | | | | | | | |
| 6. Application Data Sheet. See 37 CFR 1.76 | | 17. X Other: Claim for Priority | | | | | | | | |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | | | | | | |
| 19. COR | RESPO | NDENCE ADDRESS | | | | | | | | |
| X Customer Number: 24998 | | X Correspondence address below | | | | | | | | |
| Name DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Mark J. Thronson | | | | | | | | | | |
| Address 2101 L Street NW | | | | | | | | | | |
| City Washington State | te | DC Zip Code 20037-1526 | | | | | | | | |
| Country US Tele | ephone | (202) 785-9700 Fax (202) 887-0689 | | | | | | | | |
| Name (Print/Type) Mark J. Thronson | | Registration No. (Attorney/Agent) 33,082 | | | | | | | | |
| Signature M | 1 | Date February 24, 2004 | | | | | | | | |

PTO/SB/17 (10-03)
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| FEE TO ANOMITTAL | | Complete if Known | | | | | | |
|--|------------------------------------|--|--------------|-----------------------|---------------------------|---|--------------------------|-------------|
| FEE TRANSMITTAL | Application Number | | | | er | Not Yet Assigned | | |
| for FY 2004 | Filing Date | | | Concurrently Herewith | | | | |
| | ſ | First Named Inventor | | | ntor | Kazuaki Tobari | | |
| Effective 10/01/2003, Patent fees are subject to annual revision. | Examiner Name | | | Not Yet Assigned | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | Art Unit | | | | N/A | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 770.00 | Attomey Docket No. H6808.0044/P044 | | | | | | 044/P044 | |
| METHOD OF PAYMENT (check all that apply) | FEE CALCULATION (continued) | | | | | | | |
| Check Credit Money Cibes Ness | 2 4 | DDITE | ONAL | | | | | |
| Card Order Morie | 3. ADDITIONAL FEES | | | | | | | |
| X Deposit Account: | Large | Entitu | C | - Cotion | | | | |
| Deposit Account 04-1073 | Fee | Entity | Fee | Entity Fee | - | F D | -1-41 | |
| Number | Code | (\$) | Code | (\$) | | Fee Desc | ription | Fee Paid |
| Deposit Account Dickstein Shapiro Morin & | 1051 | 130 | 2051 | 65 | Surcharge | - late filing fe | e or oath | |
| Name Oshinsky LLP The Director Is authorized to: (check all that apply) | 1052 | 50 | 2052 | 25 | | - late provisi | onal filing fee or cover | |
| | | | | | sheet. | | | |
| X Charge fee(s) indicated below X Credit any overpayments | 1053 | 130 | 1053 | 130 | Non-Englis | sh specificatio | | |
| X Charge any additional fee(s) or any underpayment of fee(s) | 1812 | 2,520 | 1812 | 2,520 | | request for ex p | | |
| Charge fee(s) indicated below, except for the filling fee | 1804 | 920* | 1804 | 920° | Examiner a | g publication of action | 1 | |
| to the above-identified deposit account. | 1805 | 1,840* | 1805 | 1,840° | Requesting | publication o | | |
| FEE CALCULATION | 1251 | 110 | 2251 | 55 | Examiner a Extension f | action for reply within | | |
| 1. BASIC FILING FEE | 1252 | 420 | 2252 | 210 | | for reply within | | |
| Large Entity Small Entity | 1253 | 950 | 2253 | 475 | Extension f | for reply within | third month | |
| Fee Fee Fee Fee Fee Paid Code (\$) Code (\$) | 1254 | 1,480 | 2254 | 740 | Extension t | for reply within | n fourth month | |
| 1001 770 2001 385 Utility filing fee 770.00 | 1255 | 2,010 | 2255 | 1,005 | Extension f | for reply within | n fifth month | |
| 1002 340 2002 170 Design filing fee | 1401 | 330 | 2401 | 165 | Notice of A | ppeal | | |
| 1003 530 2003 265 Plant filing fee | 1402 | 330 | 2402 | 165 | Filing a brie | ef in support o | f an appeal | |
| 1004 770 2004 385 Reissue filing fee | 1403 | 290 | 2403 | 145 | | r oral hearing | | |
| 1005 160 2005 80 Provisional filing fee | 1451 1452 | 1,510 | 1451 | | | to institute a public use proceeding | | |
| SUBTOTAL (1) (\$) 770.00 | 1453 | 110 1,330 | 2452 2453 | 55 665 | | on to revive – unavoidable on to revive - unintentional | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | 1501 | 1,330 | 2501 | 665 | | fee (or reissi | | |
| Extra Fee from | 1502 | 480 | 2502 | 240 | Design issu | * | | |
| Total Claims 20 -20** = x = 0.00 | 1503 | 640 | 2503 | 320 | Plant issue | | | |
| Independent 3 3** = 000 | 1460 | 130 | 1460 | 130 | | the Commiss | | |
| Claims 5.00 Multiple Dependent = 5.00 | 1807 | 50 | 1807 | 50 | | fee under 37 | | |
| Large Entity Small Entity | 1806 | 180 | 1806 | 180 | _ | of Information | | |
| Fee Fee Fee Fee Fee Description | 8021 | 40 | | | | | ssignment per | |
| code (s) code (s) | 0021 | 40 | 8021 | 40 | property (ti | mes number o | of properties) | |
| 1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3 | 1809 | 770 | 2809 | 385 | (37 CFR 1. | | final rejection | |
| 1203 290 2203 145 Multiple dependent claim, if not paid | 1810 | 770 | 2810 | 385 | | dditional inver | | |
| 1204 86 2204 43 ** Reissue independent claims | 1801 | 770 | 2801 | 385 | | 37CFR 1.129 r Continued E | (D)) xamination (RCE) | |
| over original patent 1205 18 2205 9 ** Reissue claims in excess of 20 | 1802 | 900 | 1802 | 900 | Request for | r expedited ex | • | |
| 1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent | Other f | of a design application Other fee (specify) | | | | | | |
| SUBTOTAL (2) (\$) 0.00 | | | | | | | 0.00 | |
| **or number previously paid, if greater, For Reissues, see above | | *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00 | | | | | | 3.00 |
| SUBMITTED BY | | | | | | (Complete | (if applicable)) | |
| Name (Print/Type) Mark J. Thronson | | gistration No. 22 002 Telephone (202) 775 474 | | | | | | |
| Signature San Selection | Allotheyngenty | | | | | February 24, 20 | | |
| 10000 | | • | | | | 1 -0.0 | i culualy 24, 20 | · · · · |